

## EXPRESS MAIL NO. EV530944753US

PTO/SB/22 (10-04)
Approved for use through 07/31/2006. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  FY 2005  (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  Application Number 09/684,361  Filed October 6, 2000  For COMPOSITIONS AND METHODS FOR WT1 SPECIFIC IMMUNOTHERAPY  Art Unit	
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)  Application Number 09/684,361 Filed October 6, 2000  For COMPOSITIONS AND METHODS FOR WT1 SPECIFIC IMMUNOTHERAPY  Art Unit 1644 Examiner Ronald B. Schwadron, Ph.D.  This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee  One month (37 CFR 1.17(a)(1)) \$120 \$60 \$	
Application Number 09/684,361  For COMPOSITIONS AND METHODS FOR WT1 SPECIFIC IMMUNOTHERAPY  Art Unit 1644  This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee  One month (37 CFR 1.17(a)(1))  \$120 \$60 \$	
For COMPOSITIONS AND METHODS FOR WT1 SPECIFIC IMMUNOTHERAPY  Art Unit 1644  This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee  One month (37 CFR 1.17(a)(1))  \$120 \$60 \$	
Art Unit 1644  Examiner Ronald B. Schwadron, Ph.D.  This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee  One month (37 CFR 1.17(a)(1))  \$120 \$60 \$	
Art Unit 1644  Ronald B. Schwadron, Ph.D.  This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee  One month (37 CFR 1.17(a)(1))  \$120 \$60 \$	
reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee  One month (37 CFR 1.17(a)(1))  \$120 \$60 \$	!
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  Fee Small Entity Fee  One month (37 CFR 1.17(a)(1)) \$120 \$60 \$	!
Fee         Small Entity Fee           ☐ One month (37 CFR 1.17(a)(1))         \$120         \$60         \$	
Two months (37 CFR 1.17(a)(2)) \$450 \$225 \$	
X Three months (37 CFR 1.17(a)(3)) \$1020 \$510 \$1,020	
Four months (37 CFR 1.17(a)(4)) \$1590 \$795 \$	
Five months (37 CFR 1.17(a)(5)) \$2160 \$1080 \$	
Applicant claims small entity status. See 37 CFR 1.27.	
X A check in the amount of the fee is enclosed.	
Payment by credit card. Form PTO-2038 is attached.	
The Director has already been authorized to charge fees in this application to a Deposit Account.	
The Director is hereby authorized to charge any fees which may be required	
or credit any overpayment, to Deposit Account Number 19-1090. I have enclosed a	
duplicate copy of this sheet.	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	
I am the [] applicant/inventor.	
assignee of record of the entire interest. See 37 CFR 3.71	
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).	
☑ attorney or agent of record. Registration No. <u>50,461</u>	
attomey or agent under 37 CFR 1.34.	
Registration number if acting under 37 CFR 1.34	
September 14, 2005	
Signature Date	_
Julie A. Urvater, Ph.D., Patent Agent (206) 622-4900	
Typed or printed name Telephone Number	_

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.

Submit multiple forms if more than one signature is required.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. C:\NrPortbl\u00fcManage\u00e4MONICASA\u00e4690283\_1.DOC [04-18-01]

EXPRESS MAIL NO. EV530944753US

	Effective on 12/08/2004.					Complete if Known					
	FEE TRANSMITTAL  for FY 2005			Application I	Number	09/684,361					
\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				Filing Date		October 6, 2000					
1 4 2005				First Named	First Named Inventor		Alexander Gaiger				
<u> </u>	<u> </u>				Examiner Name		Ronald B. Schwadron, Ph.D.				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		1644					
FINE AL AMOUNT OF PAYMENT (\$)1,020				Attorney Do	210121.465	10121.465C2					
METHOD OF PAYM											
X Check ☐ Cred	dit Card	Money Order	r 📗 Other	(please identify	y):		•				
☑ Deposit Account	•	Account Number		Deposit Acco				<u>LLC</u>			
For the above-io	•	· ·	_								
= '	(s) indicated			Charge fee(	•			_			
		e(s) or underp	ayments [	Charge any	underpayn	nents or credit	t any ove	erpayments			
of fee(s) un Warning: Information information and authori	on this form ma		c. Credit card in	formation should	d not be inclu	ded on this for	m. Provid	le credit card			
FEE CALCULATION	1										
1. BASIC FILING, S	EARCH, AN	D EXAMINATI	ON FEES								
	FILING FEES SEARC					NATION ES					
		Small Entity		Small Entity	!	<u>Small</u> Entity					
Application Type	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fe</u>	es Paid (\$)			
Utility	300	150	500	250	200	100					
Design	200	100	100	50	130	65					
Provisional	200	100	0	0	0	0					
2. EXCESS CLAIM	FEES							Small Entity			
Fee Description	•					<u>!</u>	Fee (\$)	<u>Fee (\$)</u>			
Each claim over 20 (in	ncluding Reiss	ues)					50	25			
Each independent cla	im over 3 (incl	uding Reissues	)				200	100			
Multiple dependent cl	aims						360	180			
Total Claims	Extra Cla	<u>aims</u> <u>F</u>	ee (\$)	Fee Paid (\$)		Multiple Dependent (		dent Claims			
<u>8</u> -20 or HP	= <u>0</u>	X	=			Fee (\$)	<u>F</u>	ee Paid (\$)			
HP = highest numbe	r of total clain	ns paid for, if g	reater than 20								
Indep. Claims	Extra Cla	aims <u>F</u>	ee (\$)	Fee Paid (\$)							
3 -3 or HP	= <u>0</u>	X	=								
HP = highest numbe	r of independ	ent claims paid	for, if greater	than 3							
3. APPLICATION S	IZE FEE										
If the specification as under 37 CFR 1.52(of thereof. See 35 U.S	e)) the applica	ition size fee d	ue is \$250 (\$1								
Total Sheets	Extra She	ets Num	ber of each a	dditional 50 o	r fraction	thereof <u>Fe</u>	e (\$)	Fee Paid (\$)			
100 =		/50 =	(round up	to a whole nu	ımber)	x					
4. OTHER FEE(S)	-		•		-			Fees Paid (\$)			
Non-English Specific	ation, \$130 fe	ee (no small er	tity discount)								
Other (e.g., late filing		•	•	<u>time</u>				1,020			
			· · · · · · · · · · · · · · · · · · ·								
SUBMITTED BY	// =	<del></del>		otrotica NI-							
Signature Name (Print/Type)	( julio	ater, Ph.D., Pa	(Atto	stration No. rney/Agent)	50,461	Telephone		22-4900			
		STAT UN N De	TONT AMANT			Date	<ul> <li>Senter</li> </ul>	nber 14, 2005			